

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000096067

Entity Name: SURGERY CENTER OF CORAL GABLES LLC

Current Principal Place of Business:

1097 LE JEUNE ROAD
SECOND FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

14201 DALLAS PKWY
FL 13
DALLAS, TX 75254 US

FEI Number: 62-1827649

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARAN CORREA & GUARCH, P.A.
2100 SALZEDO ST
SUITE 303
CORAL GABLES, FL 33134 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: FRANCISCO LEON DE LA BARRA

04/20/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	SECRETARY	Title	VP
Name	BOWDEN, JAMES	Name	MORRIS, OWEN
Address	14201 DALLAS PKWY FL 13	Address	14201 DALLAS PKWY FL 13
City-State-Zip:	DALLAS TX 75254	City-State-Zip:	DALLAS TX 75254

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES BOWDEN

SECRETARY

04/20/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date